# UNITED STATES FORM D SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 RECEI\ FORM D 2007 9 MAR 1 NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB Approval 3235-0076 OMB Number: Expires:November 30, 2001 Estimated average burden hours per response16.00

SEC USE ONLY									
Prefix	Serial								
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/ 57	4117								

Name of Offering ( check if this is an amendment and name has changed, and indicate change)

Crude Productions, LLC

Type of Filing:

Filing Under (Check box(es) that apply):

☐ Rule 504 ☐ Rule 505

Amendment

UNIFORM LIMITED OFFERING EXEMPTION

A. BASIC IDENTIFICATION DATA

 □ Rule 506 ☐ Section 4(6)

□ ULOE

1. Enter the information requested about the issuer

■ New Filing

Name of the Issuer ( check if this is an amendment and name has changed, and indicate change.)

Crude Productions, LLC

Address of Executive Offices (Number and Street, City, State, Zip)

106 Pines Bridge Road, Katonah, NY 10536

Address of Principal Business Operations (Number and Street, City, State, Zip Code)

(if different from Executive Offices)

Telephone Number (Including Area Code)

(914) 420-2830

Telephone Number (Including Area Code)

Brief Description of Business To engage in the production and exploitation of all rights in all media throughout the world in, ancillary to and derived from a documentary film currently entitled "Crude" currently intended for initial theatrical release.

Type of Business Organization

□ corporation D business trust ☐limited partnership, already formed

other (please specify) Limited Liability Company

☐ limited partnership, to be formed

Month

Year 6

☐ Estimated

Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State;

CN for Canada; FN for other foreign jurisdiction)

Actual or Estimated Date of Incorporation or Organization:

# GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

15

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the

appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-99) 1 of 8



A. BASIC IDENTIFICATION DATA							
2. Enter the information requested for the following:							
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>							
· Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>							
Each general and managing partner of partnership issuers.							
Check Box(es) that Apply: Promoter  Beneficial Owner   Executive Officer  Director  General and/or Managing Partner Full Name (Last name first, if individual) Third Eye Motion Picture Company, Inc.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
106 Pines Bridge Road, Katonah, NY 10536							
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)							
Berlinger, Joseph Business or Residence Address (Number and Street, City, State, Zip Code)							
106 Pines Bridge Road, Katonah, NY 10536							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:   Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply:  $\square$  Promoter  $\square$  Beneficial Owner  $\square$  Executive Officer  $\square$  Director  $\square$  General and/or Managing Partner

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING														
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE									Yes □	No ⊠				
2. What is the minimum investment that will be accepted from any individual?											\$No Minimum			
3. Does the offering permit joint ownership of a single unit?										Yes ⊠	No			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full Name (La	st name fi	rst, if indiv	ridual)											
N/A Business or Ro	reidanea A	ddrase (M	umber and	Street Ci	ty State 2	Zin Code)								
Business of Ke	Sidence A	iduicss (ivi	umber and	Succi, Ci	ty, State, 2	sip code)								
Name of Asso														
States in Whic														🗆 All States
		□AK	□ AZ	□ AR	□ CA	ОСО			□ DC □ MA	□ FL □ MI	□ GA □ MN	□ HI □ MS	□ ID □ MO	
	□ IL □ MT	□ IN □ NE	□ ia □ nv	□ KS □ NH	□ KY □ NJ	□ LA □ NM	□ NY				□ OK		□ PA	
	□RI	□sc	□SD	□ TN	ΠTX	□ UT	□ VT	□VA		□WV	□ WI	□ WY	□ PR	
Full Name (Last name first, if individual) N/A														
Business or Re	esidence A	ddress (N	umber and	Street, Ci	ity, State, 2	Zip Code)								
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers(Check "All States" or check individual States)								🗆 All States						
	□ AL	□ AK	□ AZ	□ AR	□ CA	□со	□ CT	□ DE	□ DC	□ FL	□GA	□Ш		
	□IL	□ IN		□ KS	□ KY	🗆 LA	□ ME		$\square$ MA	□МІ	□ MN	□ MS	□МО	
	□ MT	□ NE	□ NV	□ин	נא 🗖	□ NM	□NY	□ NC	□ ND	ОН	□ ok	□ OR	□ PA	
	□RI	□ SC	□ SD		□ TX	□ UT	O VT	□ VA	□ WA	□WV	□ WI	□ WY	□PR	
Full Name (La	ist name fi	irst, if indi	vidual)	**										
N/A														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers(Check "All States" or check individual States)									All States					
	□ AL	$\square$ AK	□ AZ	□ AR	□ CA	□ co	□ CT	□ DE	□ DC	□ FL	□GA	O III	□ ID	
		□ IN			DKY		□ ME			□ MI		☐ MS ☐ OR	□ MO □ PA	
	□ MT □ RI	□ NE □ SC	□ NV	□ NH □ TN	□ NJ □ TX	□ NM □ UT	□ NY □ VT	□ NC □ VA	□ ND □ WA	□ OH	□ OK □ WI	□ WY	□ PR	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)														

FKKS: 316313.v1 10898.2400

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt..... Equity ..... \$ ☐ Common □ Preferred Convertible Securities (including warrants)..... \$ Partnership Interests \$ Other Units of Membership Interest in ILC......\$1,204,786.00 \$ Total......\$ \$ Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount of Number Investors Purchase Accredited Investors \$ Non-accredited Investors. \$ Total (for filings under Rule 504 only) \$ Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Type of Offering Type of Security Amount Sold \$ Rule 505 Regulation A Rule 504 ..... Total ..... 4. a. Furnish a statement of all expenses inconnection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees

Printing and Engraving Costs

Legal Fees

Accounting Fees

Engineering Fees

Sales Commissions (Specify finder's fees separately)......

FKKS: 316313.v1

Type of Offering

Other Expenses (identify)

Dollar

Amount Sold

\$50,000.00

\$50,000.00

\$

X

 $\Box$ \$

S \$

	C. OFFERING PRICE, NUM	BER OF INVE	STORS, E	XPENSES	AND	USE	OF PROCE	EEDS
4. b.	<u> </u>	ering price given in respon stion 4.a. This difference i	se to Part C - Qu s the "adjusted g	estion 1 and tota	al the		,786.00	
5.	Indicate below the amount of the adjusted gros the purposes shown. If the amount for any pur teft of the estimate. The total of the payments I in response to Part C - Question 4.b above.	pose is not known, fumish	an estimate and	check the box to	o the			
						O Dire	ments to Nicers, ectors, & Filiates	Payments to Others
	Salaries and Fees							\$
	Purchase of real estate					_	_	S
	Purchase, rental or leasing and install		•			•		\$
	Construction or leasing of plant build	-			📮	\$	U	S
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)								\$
	Repayment of indebtedness				🗆	\$	0	\$
	Working Capital			•	0	\$	Ø	\$1,154,786.00
	Other				🛮	s	0	
	Column Totals				🗅	S	×	\$1,154,786.00
Total Payments Listed (column totals added)							⊠	\$1,154,786.00
	· · · · · · · · · · · · · · · · · · ·	D. FEDERA	L SIGNAT	TURE				
an und	uer has duly caused this notice to be signed by the creating by the issuer to furnish to the U.S. Securedited investor pursuant to paragraph (b)(2) of	rities and Exchange Comr	rized person. If t hission, upon wr	his notice is file itten request of i	d under Ru ts staff, the	ile 505, ti informa	he following sign tion furnished by	ature constitutes the issuer to any
Issu	er (Print or Type)	Signatury		•	Date	2/14	1/22	
	DE PRODUCTIONS, LLC	AMIA	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	$\sim$		3/15	10+	
Nan	e of Signer (Print or Type)	Title of Signer (Print	or Type)	U		,	•	
Jose	ph Berlinger	President of Third	Eye Motion 1	Picture Comp	any, Inc	., Mana	ager of Issuer	
		ATT	ENTION					
	Intentional misstatements of	omissions of fact con	stitute federal	criminal viol	ations. (S	ee 18 U	J.S.C. 1001.)	

10898.2400